	hSirce/Cit/iD40565-PB	S Document 1	10 1		<u> 27/2005</u>	<u>, , a</u>	ge 2 of 2	
		RETURN OI	SERV	ICE		,		Att Inches Control
Service of the Summe	ons and complaint was	made by me ⁽¹⁾		May 27,	2005	1:00	p.m.	
ME OF SERVER (PRINT) Francis Davis			TITLE	Const	ahle			
Check one box below to	indicate appropriate	e method of service		001150	2010			
		defendant. Place whe	ere served					
☐ Left copies there discretion then re		dwelling house or usua	al place of	f abode wit	h a person	of suitabl	e age and	
Name of person v	with whom the summ	ons and complaint wer	e left:					
☐ Returned unexec	uted:							
		n hand to Gail						
		STATEMENT OF	SERVI	CE FEES				A
VEL	SER	VICES			TOTA	L		*****
		DECLARATION	J OF SE	DVED				
					/			
Executed onMa	y 27, 2005 Date	Signature of Server		ncis Day		nstabl	e	
Executed on Ma		Signature of Server		ncis Day		nstabl	e	
Executed on Ma		Signature of Server				nstabl	е	
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